

09/891-481 06/25/2001 Visud K. Nerulo EU469-01001  TITLE OF INVENTION: WOUND COVERING PRESSURE RELIEF PADS  APPLIN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION PEE TOTAL FEI(S) DUE	stic mailings of the other accompanying annal drawting, must ited with the United mail in an envelope or being iterative (Signetics) (Deep 1984)
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2500 BROWN & WILLIAMSON TOWER LOUISVILLE, KY 40202  05/24/2005 HDENESS2 00000075 09891481  01 FC:2501  700.00 0P  APPLICATION NO. FILMODATE  FIRST NAMED INVENTOR.  APPLICATION NO. WILLIAMSON PRESSURE RELIEF PADS  APPLICATION NO. SILMO	ited with the United mail in an envelope or being incesimite cated below.  (Decembers rearch)  (Decembers rearch)  (Decembers rearch)  (Decembers rearch)
05/24/2005 HDERESS2 000000/5 09691481  01 FC:2501 02 FC:1504  APPLICATION NO. PILLINGDATE FRIST NAMED INVENTOR ATTORNEY DOCKRIT NO. CON 09/891481 06/25/2001 Vinod K. Merula ELA69-01001  TITLE OF INVENTION: WOUND COVERING PRESSURE RELIEF PADS  APPLICATION PEE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEL(5) DUE  APPLICATION FEE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEL(5) DUE  EXAMINER ART UNIT CLASS-SUBCLASS  NGUYEN. CAMTUTRAN 3743 128-88-8000  1. Change of contrapondense address or indication of "Fee Address" (37 CFR 1.563).  Change of contrapondense address or indication of "Fee Address" (37 CFR 1.563).  Change of contrapondense address or indication of "Fee Address" (37 CFR 1.563).  Change of contrapondense address or indication of "Fee Address" (37 CFR 1.563).  Change of contrapondense address or indication from PIO/SBH 2(2) attached. Use of a Contrapondense Address" (37 CFR 1.563).  Change of contrapondense address or indication from PIO/SBH 2(2) attached. Use of a Contrapondense Address" (37 CFR 1.563).  Change of contrapondense address or indication from PIO/SBH 2(2) attached. Use of a Contrapondense Address" (37 CFR 1.563).  Change of contrapondense address or indication from PIO/SBH 2(2) attached. Use of a Contrapondense Address" (37 CFR 1.563).  Change of contrapondense address or indication from PIO/SBH 2(2) attached.  Change of contrapondense address or indication from PIO/SBH 2(2) attached.  Change of contrapondense address or indication from PIO/SBH 2(2) attached.  Change of contrapondense address or indication from PIO/SBH 2(2) attached.  Change of contrapondense address or indication from PIO/SBH 2(2) attached. Use of a Contrapondense of a single from (baving as a member a registered patient address or appeal of the patient of the pati	(Depositors name) (Signature) (Denis) FIRMATION NO.
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O9:891.481 O6:25:2001 Vinod K. Nerula EL469-01001  TITLE OF INVENTION: WOUND COVERING PRESSURB RELIEF PADS  APPLY. TYPE SMALLENTITY ISSUBFEE PUBLICATION PEE TOTAL FEI(S) DUE  ROUPEN CAMBUER ART UNIT CLASS-SUBCLASS  NGUYEN, CAMBU TRAN 3743 128-859000  1. Change of correspondence address or indication of "Fee Address" (37 CFR 1:463).  CFR 1:463;  The Address' indication of "Fee Address" Indication form PTO/SB/12) attached.  The Address' indication (or "Fee Address" Indication form PTO/SB/12) attached.  The Address' indication (or "Fee Address" Indication form PTO/SB/12) attached. Use of a Costonier Number is required.  3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (priat or typo)  PLEASE NOTE: Unless an assignment is identified below, no assignee data will appear on the patent. If an assignment is identified below, the documen mechalism as set from its 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	9384
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A check in the amount of the fee(s) is enclosed.  Description for (No small entity discount permitted)  A check in the amount of the fee(s) is enclosed.	
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5. Change in Entity Status (from status indicated above)  24 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.   4 b. Applicant is no longer claiming SMALL ENTITY status. See 52 CFR 1.27.	
The Director of the UNFTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application ide NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignments as shown by the records of the United States Paym and Tradomark Office.	une or other party in
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Subject:

ISSUE FEE Application 09/891,481

Please find the following documents related to Application Number 09/891,481 (Wound Covering Pressure Relief Pad):

Part B - Fee Transmittal PTO-2038 Credit Card Payment Form

If there are any questions or corrections needed regarding this submission, please call me at 502-222-5413.

Regards,

Joan Simunic Reg. 43,125